

I would like to thank Senator Gerrattanna, Representative Dillon and the members of the Health and Hospitals subcommittee for allowing me to tell my personal story tonight.

Good Evening. My name is Faundala Weyman. Presently, I am an assistant administrator at a Network, Inc. group home. I am also a member and delegate of the New England Health Care Employees Union, SEIU District 1199. I have worked at Network for more than four years and in the human service industry for over 13 years.

In addition to being a healthcare worker I am also a married, 31 year old mother of three. My oldest child is 8 and he is on the autism spectrum. However, he is doing well in school and is on grade level in most of his classes.

Working in the human service industry has been a life-long dream of mine. It has been a blessing, rewarding and fulfilling experience. I never could have imagined the impact we have on the lives of others.

My earliest memories of interacting with people that have developmental disabilities goes back to my great-grandmother, Daisy—she was also a human services worker. Every Saturday morning, from the time I was five years old, my mother and I would join my Grandma Daisy and her clients for breakfast.

The client I remember most was Misty. I am still astounded by her drive, personality and spirit. Sometimes people would stare at her and give dirty looks. I once asked her if those people upset her. She told me, "Faun, you shouldn't worry about how other people see you, it only matters how you see yourself." I believe she was absolutely correct, especially because she eventually got out of her group home and opened her own diner in South Bend, Indiana.

Here was a young woman with a developmental disability who walked with a limp, had slurred speech, but she overcame her disability and achieved more than some *normal* people can. I believe that my great-grandmother took great pride in knowing that—due to her hard work ethics, empathy and compassion—one of her clients was able to achieve the American dream.

My great grandmother was a wonderful, strong, compassionate human service worker, despite only having an elementary school education. She owned her own home and saved money for all of her grandchildren every Christmas until she passed away at the age of 90 (?).

Not only do I believe I gained my passion for my work through her actions, but many people with developmental disabilities were made to feel like they could be contributing members of society because of her—no matter how great or small a contribution.

The times we are living in are full of uncertainty. There are major threats of cuts to human services in our state. These cuts would affect more than just worker pay. Many clients live in group homes because they could no longer be cared for by their families. Depending on the situation and the severity of their condition, they need the support of 24-hour care.

Many of the clients we serve have little to no family involvement. So, what does that mean to a developmentally challenged person? It means the staff at their group home becomes their family.

Most of us agree that family is what shapes and molds our lives. This is how we grow, form opinions, and deal with life challenges. How does a developmentally disabled person get the benefit of a structured family environment if their group home is constantly changing or staff turnover is high? Many of the caregivers in the mental health and developmentally disabled field have been devoted to improving the lives of people who have no voice—figuratively or literally.

The community we serve may have little to no education, some cannot even speak or use any form of communication to make their desires known. We, the hourly staff workers, have to assess, intervene and make life altering decisions on behalf of our clients. Cuts to our agencies severely disrupt this process by forcing many workers to seek other jobs.

What happens if a worker gets sick? It varies agency by agency depending upon where you work, how many hours you have and if your employer even offers healthcare. The fact is, there is a serious threat to employee health benefits where many of us work. Some employers are telling workers they will no longer be able to offer health insurance in 2014. So, to answer the question, if a human service worker gets sick with no insurance, they go to the emergency room and get billed. However, most of us are already paid too little to afford a medical bill and no money for our agencies could cause some of us to lose more than \$1.00 an hour in pay.

Most of us are in this field because we care about people. We care about people who cannot in any way take care of themselves, plan or prepare for their future. We are not trying to become millionaires. All we want is a respectable wage, comparable to our job expectations, responsibilities and duties. In our field especially, the responsibilities are becoming greater. However, much to our dismay, there have been zero raises for many of us in the past five years.

We are required to have a lot of additional training, as well. We are med certified—administering vital medications to our clients. We receive training for CPR, first aid, PMT. We have to have a clean motor vehicle record and remain up-to-date in services throughout the year. Depending upon the agency and client needs, we have to train for additional nursing delegations including, but not limited to, tube feeding, checking residual stomach contents and UNS magnet surveys.

As our jobs become more important, the list of duties will continue to grow. Care is delivered to each person on an individual basis, which is how care should be approached—not grouped into classes of those who have getting treatment and those who have not getting none.

Being from South Bend, Indiana originally, all I heard growing up was ‘a union job is a good job, good benefits, they fight for you, etc.’ I did not understand why all workers were not treated equally. I am inspired by my thoughts on unions and the Civil Rights movement when I go to contract negotiations. I feel like I have strength because we have a union.

I was overwhelmed when I came to my agency over four years ago and went to our contract negotiations and heard about cuts, back then. I had just gotten this job, having been in the human services industry for 8 years at that point, and was proud to be hired by a company, doing what I love, and able to make a decent wage. I was going to start at a wage of \$15 per hour. I would be able to pay for food for my family and get a car.

Prior to getting this job, I qualified for food stamps because of the low wages I made at my non-union job. I would now be able to save my house from foreclosure. My autistic child would continue to have a roof over her head and live in a safe environment. Needless to say, I was enthusiastic about my new job and eager to get involved with the union.

Many of my co-workers marched for better wages, pensions, healthcare, sick days, vacation days, etc. Now, with our agencies funding threatened, I am worried that after years of struggle we could lose all of it. Staff turnover could be higher than ever. The quality of client care would suffer as a result. This will also impact the family aspect of the group home.

If we see cuts to our agencies, human service workers face 'McDonald's' wages and will not be able to provide the quality of care our clients deserve. I know we would all want good quality care if we had a family member in this situation.

Thank you for your time ladies and gentlemen. We all have a story to tell, many different paths and opinions. However, we all should have a common goal to protect and serve developmentally disabled individuals and the workers that care for them.

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